

Application Data Sheet

Application Information

Application number::
Filing Date:: 03/15/02
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: Telemetry Module With Configurable Data Layer
For Use With An Implantable Medical Device
Attorney Docket Number:: 11738.00058
Request for Early Publication?:: NO
Request for Non-Publication?:: NO
Suggested Drawing Figure::
Total Drawing Sheets:: 11
Small Entity?:: NO
Latin name::
Variety denomination name::
Petition included?:: NO
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: NO

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Steven
Middle Name:: M.
Family Name:: Goetz
Name Suffix::
City of Residence:: Brooklyn Center
State or Province of Residence:: Minnesota
Country of Residence:: USA
Street of mailing address:: 4650 58th Pl. N.,
City of mailing address:: Brooklyn Center
State or Province of mailing address:: Minnesota
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 55429

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Gregory
Middle Name:: Pat
Family Name:: Spar
Name Suffix::
City of Residence:: Big Lake
State or Province of Residence:: Minnesota
Country of Residence:: USA
Street of mailing address:: 15841 233rd Avenue
City of mailing address:: Big Lake
State or Province of mailing address:: Minnesota

Country of mailing address:: USA
Postal or Zip Code of mailing address:: 55309

Correspondence Information

Correspondence Customer Number:: 22907

Representative Information

Representative Customer Number:: 22907

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Medtronic, Inc.
Street of mailing address:: 710 Medtronic Parkway NE
City of mailing address:: Minneapolis
State or Province of mailing address:: Minnesota
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 55432-5604